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Assembly California Hegislature



Assembly Committee on ALCOHOL AND DRUG ABUSE

JIM BEALL, JR., CHAIR ASSEMBLYMEMBER 24th DISTRICT

DATE:

November 15, 2007

TO:

Rene Zito, Director

California Department of Alcohol & Drug Programs

Richard Woonacott, Deputy Director of Legislation & External Affairs

California Department of Alcohol & Drug Programs

FROM:

Assemblymember Jim Beall, Jr., Chair Jim Beall J Select Committee on Alcohol and Drug Abuse

RE: Clarification on Informational Requests from the Assembly Select Committee on Alcohol and Drug Abuse

Recently, ADP contacted my office to request clarification on the informational requests made by the Assembly Select Committee on Alcohol and Drug Abuse. The intent of this memo is to articulate the committee's requests and to clarify what the committee would like the Department to include in its written report on utilization of SBIRT funds and its report back on prenatal assessments and screening. The subsequent paragraphs provide clarification.

Informational Requests

On August 30, 2007 the Department of Alcohol & Drug Programs (ADP) provided the Select Committee on Alcohol and Drug Abuse with valuable testimony regarding the scope of the substance abuse problem in California including gaps and barriers to successful treatment outcomes. During this meeting, Assemblymember Jim Beall, Jr. requested ADP report back to the committee on the following: a) the status of prenatal screening and assessments in California; and, b) the Department's implementation of the US Centers for Medicare and Medicaid Services (CMS) rule change that allows the agency to reimburse for alcohol and drug screening and brief intervention (SBI). Additionally, subsequent to the August hearing, select committee staff requested a written report regarding how the department is utilizing its SBIRT funds.

Utilization of SBIRT Funds

California is a recipient of SAMSHA SBIRT funds. The select committee would like ADP to provide a written status report regarding how SBIRT funds are utilized. Specifically, how much money does the State receive, funding requirements and

restrictions and how is California using the funds to expand and enhance State substance abuse treatment service systems.

Prenatal Screening and Assessments

Prenatal screening and assessments done on a wide scale could prevent thousands of substance-exposed births and significantly reduce costs to treat substance related disabilities. For this reason, it is critical for members of the select committee to be apprised of the current prenatal screening and assessment mandates and reporting requirements relevant to substance abuse. The committee would like to be informed about the following:

- 1. The current reporting requirements the State is mandated to compile. For example, the State Department of Health Services (DHS) is mandated to provide an annual report on total number of prenatal substance exposed births. What other reporting requirements are mandated? Are these documents available to the Committee?
- 2. What interagency bodies, if any, are examining strategies to address prenatal screening and assessment? Currently, ADP, DDS, SSA and DHS are all involved in issues relevant to prenatal screenings and assessments for the impact of substance abuse. Is there any forum in which these issues are addressed across agency lines?
- 3. How much does the state allocate to prenatal screening and assessments as it relates to substance abuse and how many children are served?
- 4. Finally, the Committee requested ADP to research whether First 5 California provides funding for these types of screenings and whether it has any data on what county commissions allocate from their funding. Additionally, does ADP have any information about the Commission's allocations related to ADP's substance abuse mandates?

I appreciate the opportunity to clarify our requests and look forward to working with you in the future. Please contact my staff, Sunshine Borelli if you need additional information.